UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Received SEC

FEB 1 9 2008

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

Washington, DC 20549

April 30, 2008

OMB Number:

Estimated average burden

hours per response:

Expires:

3235-0076

16.00

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Goldman Sachs Global Tactical Trading III, LLC: Units of Limited Liability Company Interests ☐ Section 4(6) □ ULOE Filing Under (Check box(es) that apply):

Rule 504 ☐ Rule 505 ☑ Rule 506 Type of Filing: ☐ New Filing ☐ Amendment A. BASIC IDENTIFICATION DATA BEST AVAILABLE COPY 1. Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Name of Issuer Goldman Sachs Global Tactical Trading III, LLC (Number and Street, City, State, Zip Code) Telephone Nu Address of Executive Offices c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New (609) 497-5500 Jersey 08540 (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business To operate as a private investment fund. THOMSON Type of Business Organization FINALTE Case specify
Limited Liability Company ☐ limited partnership, already formed □ corporation D business trust ☐ limited partnership, to be formed Month Year 4 ☑ Actual □ Estimated 0 Actual or Estimated Date of Incorporation or Organization: 0 4 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for D E State: CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and hat have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Fotential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		•	A	BASIC IDENT	IFI	CATION DATA				-
2. Ent	ter the information rec	uested for the fol	llowing	g:						
*	Each promoter of th	ic issuer, if the iss	uer ha	s been organized w	rithin	the past five years;				
•,	Each beneficial owr of the issuer;	ter having the pov	wer to	vote or dispose, or	direc	t the vote or disposi	tion (of, 10% or:	more	of a class of equity securities
	Each executive offic	er and director o	f corpo	orate issuers and of	com	orate general and ma	anagi	ng partners	of pa	artnership issuers; and
•	Each general and m		-		•	J	Ī	•	•	•
Check B	Box(cs) that Apply:			Beneficial Owner		Executive Officer	0	Director	Ø	General and/or Managing Partner
Full Nar	me (Last name first, if	individual)							•	
Goldma	n Sachs Hedge Fund	Strategies LLC	(the I	ssuer's Managing	Men	iber)				<u> </u>
Busines	s or Residence Addre	ss (Number and	d Stree	t, City, State, Zip (Code)					
701 Mo	unt Lucas Road, Pri	nceton, New Jers	sey 08	540						
Check E	Box(es) that Apply:	☐ Promoter	Ø	Beneficial Owner		Executive Officer	0	Director		General and/or Managing Partner
Full Na	me (Last name first, if	individual)								
Goldma	an Sachs Hedge Fund	l Partners III, Li	ւշ		_					
	s or Residence Addres	•		•	_					
c/o Gold	dinan Sachs Hedge F								_	
Check E	Box(es) that Apply:	☐ Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Na	me (Last name first, if	individual)								
	1994 'b' Trust	•								
	s or Residence Addre	ss (Number and	d Stree	t, City, State, Zip (Code)					
	Market Street, 18th									
Check B	Box(es) that Apply:	☐ Promoter	Ø	Beneficial Owner	0	Executive Officer	0	Director		General and/or Managing Partner
Full Nat	me (Last name first, if	`individual)								
McCab	e Multi-Manager Ins	urance Fund Se	ries of	the Sali Multi-Se	ries I	und, L.P.	_			
	s or Residence Addre	•								
	homas Neimar, 6850									
Check B	Bex(cs) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer the Issuer's Managir		Director*		General and/or Managing Partner
Full Na	me (Last name first, if	individual)								
	ta, Jennifer	•								
	s or Residence Addre	ss (Number and	d Stree	t, City, State, Zip (Code)					
c/o Gold	droan Sachs Hedge F	und Strategies L	.LC, 3	2 Old Slip, New Y	ork,	New York 10005				
	Box(es) that Apply:	☐ Promoter		Beneficial Owner				Director* ember		General and/or Managing Partner
Full Na	me (Last name first, if	individual)								
Clark, I	Kent A.									
Busines	s or Residence Addre	ss (Number and	d Stree	t, City, State, Zip (Code)					
c/o Gold	dinan Sachs Hedge F	und Strategies L	LC, C	ne New York Pla	2a, N	ew York, New Yor	k 10	004		
Check E	Box(es) that Apply:	☐ Promoter		Beneficial Owner	П	Executive Officer	Ø	Director*		General and/or

c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Lawson, Hugh J.

*of the Issuer's Managing Member

Managing Partner

.				B. INI	FORMAT	ION ABO	UT OFFI	ERING				
 -		•							•		Yes	No
1. Has th	e issuer sold	d, or does th										Ø
•			A	Answer also	in Appendi	ix, Column	2, if filing u	inder ULOI	. .			
2. What i	s the minim	uum investm	ent that wil	I be accepte	ed from any	individual?	•				\$	00,000*
*Managin 3. Does i	g Member, he offering	, in its sole permit joint	discretion, ownership	may accept of a single	t subscripti unit?	ons below	the minimu	ım.	**************		Yes ☑	No
commi If a per or state	the informatission or single single to be lies, list the neer or dealer,	nilar remun- isted is an a same of the	cration for s ssociated po broker or de	solicitation erson or age caler. If me	of purchase int of a brok ore than five	rs in connect er or dealer e (5) person	tion with si registered v s to be liste	ales of secu with the SE	rities in the Cand/or wi	offering. th a state		
	(Last name Sachs & C		ividual)									
Business o	r Residence	Address ()	Number and	Street, City	y, State, Zip	Code)						
85 Broad	Street, Nev	v York Nev	v York 100	04								
	Associated E			-								•
States in V	Vhich Perso All States" (n Listed He or check inc	s Solicited lividual Stat	or Intends t tes)	o Solicit Pu	rchasers					⊠AII	States
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[IL]	[IN]	[A]	[KS]	[KY]	(LA)	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[14]	[MM]	[YY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]
[RI]	[SC]	[SD]	[אד]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	e first, if ind	lividual)									
				1.Gt . G'	. 0 7!-	Code						
Business o	or Residence	e Address (1	vumber and	Street, City	y, State, Zip	Code						
Name of A	Associated F	Broker or De	ealer									
				<u></u>								
States in V (Check *	Vhich Perso All States"	on Listed Ha or check inc	ıs Solicited lividual Stat	or Intends t tes)	o Solicit Pu	rchasers			*************		🗆 AI	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[1L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	[WI]	[WY]	(PR)
Full Name	(Last name	e first, if ind	lividua!)									
				 							-	
Business o	or Residence	e Address (1	Number and	I Street, City	y, State, Zip	Code)						
Name of A	Associated F	Broker or De	calcr				_	 -				
	Which Perso All States"						************	••••				All States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	(DC)	(FL)	[GA]	(HI)	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	(LA)	(ME)	(MD)	[MA]	[MI]	(MN)	[MS]	[MO]
[MT]	[NE]	[٧٧]	[NH]	[[1]	[MM]	[YY]	(NC)	(ND)	[OH]	[OK]	(OR)	(PA)
[RI]	[SC]	(SD)	[TN]	[TX]	(ហា)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		A	mount Already Sold
	Debt	\$_	0	\$		0
	Equity		0	\$		0
	☐ Common ☐ Preferred	_	· ·			
	Convertible Securities (including warrants)	s _	0	\$		0
	Partnership Interests	s _	0	\$		0
	Other (Specify) Units of Limited Liability Company Interests	\$	199,865,459	\$		199,865,459
	Total	s	199,865,459	\$		199,865,459
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					A
			Number Investors			Aggregate Oollar Amount of Purchases
	Accredited Investors		81	\$		199,865,459
	Non-accredited Investors		0	s		0
	Total (for filings under Rule 504 only)	_	N/A			N/A
	Answer also in Appendix, Column 4, if filing under ULOE.	_			-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Time of			Oollar Amount
	Type of offering		Type of Security			Sold
	Rule 505		N/A	S		N/A
	Regulation A		N/A	\$		N/A
	Rule 504.	_	N/A	S		N/A
	Total		N/A	S		N/A
ti ti	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_				
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs			\$		0
	Legal Fees		Ø	\$	_	97,263
	Accounting Fees			\$	_	0
	Engineering Fees			S		0
	Sale: Commissions (specify finders' fees separately)			\$		0
	Other Expenses (identify)		•	\$		0
	Total		Ø	\$		97,263

C. OFFERING PRICE.	NUMBER OF INVESTORS, EXI	PENS	ES A	AND USE OF P	ROCE	EDS	
b. Enter the difference between the aggre Question 1 and total expenses furnished difference is the "adjusted gross proceeds to	gate offering price given in response to 1 in response to Part C - Question 4.6	Part . Th	C is	, -	 s_		199,768,196
5. Indicate below the amount of the adjusted to be used for each of the purposes shown furnish an estimate and check the box t payments listed must equal the adjusted gre to Part C - Question 4.b. above.	If the amount for any purpose is not the left of the estimate. The total	know of the	n, ic				
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			s_	0		s_	0
Purchase of real estate			\$_	0		s_	0
Purchase, rental or leasing and installation	of machinery and equipment		\$_	0		s _	0
Construction or leasing of plant buildings a	Construction or leasing of plant buildings and facilities					s _	0
Acquisition of other businesses (including this offering that may be used in exchananother issuer pursuant to a merger)	ige for the assets or securities of	_	s	. 0	D	s	0
Repayment of indebtedness		_	s -	0		s –	0
Working capital		-	 S	0		s -	0
.				•	_		•
Other (specify): Investment Capital			s _	0	_ \	2 -	199,768,196
Column Totals		O	\$ _	0	☑ -	s _	199,768,196
Total Payments Listed (column totals added	l)	• • • • • • • • •		Ø \$	199,7	68,190	<u> </u>
	D. FEDERAL SIGNATU	RE	-				
The issuer has duly caused this notice to be following signature constitutes an undertaking of its staff, the information furnished by the issuer.	signed by the undersigned duly authors by the issuer to furnish to the U.S. So	rized ecuriti	es an	d Exchange Comm	nission,	upon	Rule 505, the written request
ssuer (Print or Type)	Signature	·,		Date			
Goldman Sachs Global Tactical Trading III, LC	good -			February (5), 2	008		
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Kathryn Pruess	Vice President of the Issuer's Mana	ging	Mem	ber			
				_	_		
						\ TI	

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).